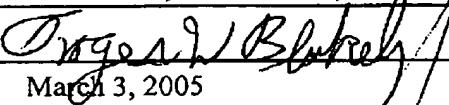
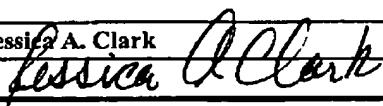


TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application No.	10/618,061
		Filing Date	July 11, 2003
		First Named Inventor	Michael P. Lammert
		Art Unit	3751
		Examiner Name	Le, Huyen D
Total Number of Pages in This Submission	10	Attorney Docket Number	2590P067

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Facsimile Cover Sheet
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> PTO/SB/08		
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Basic Filing Fee		
<input type="checkbox"/> Declaration/POA		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Roger W. Blakely, Jr., Reg. No. 25,831 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	March 3, 2005

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Jessica A. Clark	Date	March 3, 2005
Signature			

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 08/04/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$ 50.00)

Complete if Known

Application Number	10/618,061
Filing Date	July 11, 2003
First Named Inventor	Michael P. Lammert
Examiner Name	Le, Huyen D
Art Unit	3751
Attorney Docket No.	2590P067

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order None Other (please identify):

Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s)	<input type="checkbox"/> Credit any overpayments
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.	

FEE CALCULATION

1. EXTRA CLAIM FEES

		Extra Claims	Fee from below	Fee Paid
Total Claims	21	20*	1	\$50.00
Independent Claims	3	3*	0	\$0.00
Multiple Dependent				

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	360	2203	180	Multiple Dependent claim, if not paid
1204	300	2204	150	"Reissues independent claims over original patent
1205	300	2205	150	"Reissues claims in excess of 20 and over original patent
SUBTOTAL (1)		(\$)	50.00	

*or number previously paid, if greater. For Reissues, see below

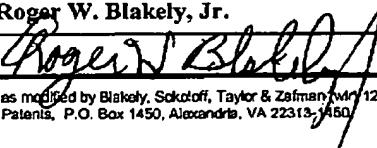
2. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
2053	130	2053	130	Non-English specification	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1460	130	2460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(a)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
1809	760	1809	365	Filing a submission after final rejection (37 CFR § 1.129(e))	
1810	790	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify)		SUBTOTAL (2)		(\$)	

SUBMITTED BY

Complete if applicable

Name (Print/Type)	Roger W. Blakely, Jr.	Registration No. (Attorney/Agent)	25,831	Telephone	(714) 557-3800
Signature				Date	03/03/05

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman, LLP, 12/15/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Appl. No. 10/618,061
Restr. Resp. & Amdt. Dated 03/03/2005
Reply to Office Action of February 4, 2005

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application. No. : 10/618,061 Confirmation No. 4328
Applicant : Michael P. Lammert et al.
Filed : 07/11/2003
TC/A.U. : 3751
Examiner : Le, Huyen D
Docket No. : 2590P067
Customer No. : 8791

Commissioner for Patents
PO Box 1450
Alexandria VA 22313-1450

RESPONSE TO RESTRICTION REQUIREMENT & AMENDMENT

Sir:

The following is a response to the Office Action dated February 4, 2005.

The Examiner has provided a restriction requirement, requiring Applicant to elect between Species I, Figure 1 and Species II, Figure 2. Applicant hereby elects Species II, Figure 2 without traverse. Claims 1, 4-7, 10-13 and 16-21 read on the elected species

In addition, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.